



Docket No.: 1317.1071

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re the Application of:

Tohru YOSHIDA

Serial No. 09/809,107

Group Art Unit: 2653

Confirmation No. 8941

Filed: March 16, 2001

Examiner: B. Vuong

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AUG 04 2004

Technology Center 2600

For: DEVICE THAT RECORDS ON AN OPTICAL DISC AND METHOD THEREOF

**AMENDMENT**

Commissioner for Patents  
PO Box 1450  
Alexandria, VA 22313-1450

Sir:

This is in response to the Office Action mailed June 4, 2004, and having a period for response set to expire on September 4, 2004.

The following amendments and remarks are respectfully submitted. Reconsideration of the claims is respectfully requested.

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S&H Form: (10/03)

<b>REPLY/AMENDMENT FEE TRANSMITTAL</b>	Attorney Docket No.	1317.1071
	Application Number	09/809,107
	Filing Date	March 16, 2001
	First Named Inventor	Tohru YOSHIDA
	Group Art Unit	2653
AMOUNT ENCLOSED	0.00	Examiner Name B. Vuong

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FEE CALCULATION (fees effective 10/01/03)					Technology Center 2600
CLAIMS AS AMENDED	Claims Remaining After Amendment	Highest Number Previously Paid For	Number Extra	Rate	Calculations
TOTAL CLAIMS	21	- 23 =	0	X \$ 18.00 =	\$ 0.00
INDEPENDENT CLAIMS	4	- 6 =	0	X \$ 86.00 =	0.00
Since an Official Action set an <u>original</u> due date of <u>September 4, 2004</u> , petition is hereby made for an extension to cover the date this reply is filed for which the requisite fee is enclosed (1 month (\$110); 2 months (\$420); 3 months (\$950); 4 months					
If Notice of Appeal is enclosed, add (\$330.00)					
If Statutory Disclaimer under Rule 20(d) is enclosed, add fee (\$110.00)					
Information Disclosure Statement (Rule 1.17(p)) (\$180.00)					
Total of above Calculations =					\$ 0.00
Reduction by 50% for filing by small entity (37 CFR 1.9, 1.27 & 1.28)					
<b>TOTAL FEES DUE =</b>					<b>\$ 0.00</b>

- (1) If entry (1) is less than entry (2), entry (3) is "0".  
 (2) If entry (2) is less than 20, change entry (2) to "20".  
 (4) If entry (4) is less than entry (5), entry (6) is "0".  
 (5) If entry (5) is less than 3, change entry (5) to "3".

METHOD OF PAYMENT	
<input type="checkbox"/>	Check enclosed as payment.
<input type="checkbox"/>	Charge "TOTAL FEES DUE" to the Deposit Account No. below.
<input checked="" type="checkbox"/>	No payment is enclosed and no charges to the Deposit Account are authorized at this time (unless specifically required to obtain a filing date).

GENERAL AUTHORIZATION	
<input checked="" type="checkbox"/>	If the above-noted "AMOUNT ENCLOSED" is not correct, the Commissioner is hereby authorized to credit any overpayment or charge any additional fees necessary to: <div style="margin-left: 40px;">           Deposit Account No. <span style="border: 1px solid black; padding: 2px;">19-3935</span>            Deposit Account Name <span style="border: 1px solid black; padding: 2px;">STAAS &amp; HALSEY LLP</span> </div>
<input checked="" type="checkbox"/>	The Commissioner is also authorized to credit any overpayments or charge any additional fees required under 37 CFR 1.16 (filing fees) or 37 CFR 1.17 (processing fees) during the prosecution of this application, including any related application(s) claiming benefit hereof pursuant to 35 USC § 120 (e.g., continuations/divisionals/CIPs under 37 CFR 1.53(b) and/or continuations/divisionals/CPAs under 37 CFR 1.53(d)) to maintain pendency hereof or of any such related application.

SUBMITTED BY: STAAS & HALSEY LLP			
Typed Name	Michael D. Stein	Reg. No.	37,240
Signature		Date	8/2/04